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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/653,525			ing Date 02/2003	To be Mailed	
APPLICATION AS FILED - PART I (Cotumn 1) (Cotumn 2)									OTHER THAN SMALL ENTITY 🛛 OR SMALL ENTITY				
FOR			NUMBER I	UMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A	¢.	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A		
EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))			N/A		N/A			N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			x \$ =	- 1	OR	x \$ =		
	EPENDENT CLAIM CFR 1.18(h))			ninus 3 =	•			x \$ =	4		x \$,=	<i></i>	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	sheets of pa is \$250 (\$12 additional 50	per, the a 5 for sma sheets o	drawings exceed 100 pplication size fee due II entity) for each r fraction thereof, See and 37 CFR 1.16(s).			,					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											7		
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	11/15/2006	CLAIMS REMAININ AFTER AMENDME		HIGHE NUMB PREVI PAID F	er Ously	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(8))	• 47	Minus	- 47		= 0		X \$25 =	0	OR	x s =		
	independent (37 CFR 1.16(h))	• 3	Minus	3		= 0		X \$100 =	0	OR	x \$ _=		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
						. 4		TOTAL ADD'L FEE	.0	OR	TOTAL ADD'L FEE		
		· (Column			ımın 2) HEST	(Column 3)							
AMENDMENT		REMAINII AFTER AMENDMI	NG	NUI PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR	.47	Minus	- 4	7		H	x \$ =		OR	x \$ /=	·: `	
	1,18(h) Independent (37 CFR 1,18(h))	. 3	Minus	***	2	=		x \$ =		OR	/ \$ =		
	Application Si		FR 1.16(s))	<u> </u>					/	/			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))									OR			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									otrument F	OR Camin	TOTAL ADD'L FEE		
" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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